

What are “frequent” bladder infections?

Bladder infections are also called urinary tract infections, or UTIs. They are a potential complication of intermittent catheterization.

Bladder infections happen an average of two to three times a year for people who use intermittent catheterization to empty their bladder.

If you have had more than three bladder infections in the last twelve months, you need to take special action to treat them.

The information in this brochure will tell you how frequent bladder infections are treated. For more information on preventing bladder infections, see our brochure on Bladder Health for Intermittent Catheterization Users.



For more information

SCIRE Rehabilitation Evidence

<http://www.scireproject.com/rehabilitation-evidence/bladder-management>

Geneva Foundation for Medical Education and Research

http://www.gfmer.ch/Guidelines/Urinary_tract_infections_urinalysis/Urinary_tract_infections_urinalysis.htm

Spinal Cord Connections

<http://www.spinalcordconnections.ca/default.aspx>

SCI University

<http://sci-u.ca/beta/player.html>

Thank you to our partners

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For more information on the AB SCI Initiative, contact the Canadian Paraplegic Association (Alberta) at 780-424-6312 or www.cpa-ab.org

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Treating Frequent Bladder Infections

For intermittent catheterization users



How do you know if you have a bladder infection?

A bladder infection is indicated by a positive urine culture/dipstick along with any three of the following symptoms lasting 24 hours or more:

- fever
- chills
- delirium or confusion
- malaise/lethargy
- back or side pain above the pelvis and below the ribs
- blood in urine
- pelvic discomfort
- increased incontinence
- increased spasticity
- autonomic dysreflexia
- the need to catheterize more frequently

Your doctor will test your urine for bacteria. If the test is positive, she/he will prescribe antibiotics. Always take the correct dose and finish all of your antibiotics. This prevents the bacteria from becoming resistant to antibiotics.

What to expect ... Treating frequent bladder infections

Untreated bladder infections can lead to septicemia, which is an infection that has moved into the blood. Septicemia is a leading cause of death in people with spinal cord injuries.

If you have had three or more bladder infections in the last twelve months, then these extra steps will be taken:

- A nurse will review your catheterization technique and hygiene.
- A renal (kidney) and bladder ultrasound will be performed.
- Your kidney function will be tested.
- You may be referred to a urologist specializing in neurogenic bladder issues.
- The urologist may test bladder function using urodynamic studies (UDS), and/or inspect the inside your bladder using a procedure called a cystoscopy. She/he may order further radiology studies.
- The urologist may talk to you about other options, such as treatment of bladder muscle tone, other oral or injected medications, alternative methods of voiding, or surgery.
- She/he may advise you to use cranberry extract pills, D-Mannose pills and vitamin C to make your urine more acidic.

Preventing future bladder infections

The more bladder infections you have, the greater the chance of complications affecting the urinary tract.

Here are some basic steps to prevent bladder infections:

- Drink enough fluids to have clear, light yellow urine (1.7 L for a 58 kg person or 30 ml per kg of body weight).
- Catheterize 4 to 6 times per day. Change the amount you drink and the number of times you catheterize to achieve urine volumes less than 500 ml each time.
- Catheterize during the night if your morning urine volume is greater than 500 ml.
- When catheterizing, always have clean hands and clean supplies. Always keep the area around your urinary opening clean.
- Eat well and get enough sleep and exercise. A physiotherapist can help design an exercise routine that works for you.
- See your doctor regularly for routine check-ups. Have an annual kidney and bladder ultrasound along with blood work.
- See a urologist annually to check your bladder function, and to look for bladder stones or bladder cancer.